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Hideaki Watanahe

TITLE OF INVENTION: PERSON AUTHENTICATION SYSTEM, PERSON AUTHENTICATION METHOD, AND PROGRAM PROVIDING MEDIUM

26263 7590 11/14/2006

SONNENSCHEIN NATH & ROSENTHAL LLP P.O. BOX 061080 WACKER DRIVE STATION, SEARS TOWER

FILING DATE

08/30/2001

CHICAGO, IL 60606-1080

APPLICATION NO.

00/042 692

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January 16, 2007			(Date)
FIRST NAMED INVEN	FOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.

9983

APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$n \$1700 02/14/2007 EXAMINER APTIMIT CLASS-SUBCLASS HO THOMAS M 2132 713-155000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list SONNENSCHEIN NATH & the names of up to 3 registered patent attorneys or agents OR, alternatively, ROSENTHAL LLP ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. ☐ "Fce Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) SONY CORPORATION TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 😡 Corporation or other private group entity 🔲 Government 4a. The following fec(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) ☐ Issue Fee A check is enclosed. 2 Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3140 (enclose an extra copy of this form).

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David R. Metzder00

5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

Authorized Signature

Typed or printed name

. January 16, 2007

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□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Registration No.